

A8. FOUR MONTH QUANTITATIVE QUESTIONNAIRE

[Note: The ordering of the sections and sub-sections in the four-month questionnaire isn't chronological because these sections and questions have been labeled to be consistent with the baseline questionnaire. We didn't follow the same flow of the baseline questionnaire because it wasn't appropriate for this follow-up. In electronic form, surveyors will not see these back-end section and question numeric labels]

Thank you for your participation in this follow-up survey. This survey contains five to seven sections, depending on which arm of the study you are in, and we expect it will take about 25 minutes to complete. If you feel uncomfortable at any point during the survey, let me know, and we can skip that question.

Section 0: HIV self-test kit use

[Only displayed to individuals in the self-testing arms of the trial]

Now I am going to ask you some questions related to HIV self-testing and your experiences with HIV self-testing.

[DIRECT DISTRIBUTION ARM QUESTIONS]

4M0A01. In the last month, did your peer educator offer you an HIV self-test?

- Yes
- No
- Prefer not to answer

[Skip to Section 3 if 4M0A01==No]

4M0A02. Did you take the HIV self-test offered by your peer educator in the last month?

- Yes
- No
- Prefer not to answer

[Skip to Section 4 if 4M0A02==No]

4M0A03. I don't want to know the results, but did you use the HIV self-test that you were given by your peer educator in the last month?

- Yes
- No
- Prefer not to answer

[Skip to 4M0A04 if response to 4M0A03=="Yes"]

4M0A04. Why did you not use the HIV self-test kit in the last month? (*ask participant to describe reasons and check appropriate boxes or write in response if not on the list*)

- I was unsure how to use it
- I did not have time

- I was concerned about confidentiality
- I do not want to know my HIV status
- Other (if other, give reason)

4M0A05. What did you do with the HIV self-test given to you by the peer educator in the last month?

- It is at my home/in my possession
- Disposed of in the trash
- Gave it to a friend
- Gave to a client
- Gave to a family member
- Gave it to a Queen mother
- Other: _____
- Prefer not to answer

[Skip to Section 3 if response to 4M0A02==No]

4M0A07. Where did you use the HIV self-test kit you were recently given?

- At home (where I currently live)
- At my workplace (describe workplace type – bar, brothel, etc)
- At a friend's house
- At my family's house
- Other (describe)

4M0A08. Were you alone when you used this HIV self-test kit?

- Yes
- No
- Prefer not to answer

4M0A09. How easy or difficult did you find it to use the HIV self-test?

- Very easy
- Easy
- Neither easy nor difficult
- Difficult
- Very difficult
- I prefer not to answer

4M0A10. Did you refer to the instructions provided when you last used the HIV self-test kit?

- Yes
- No
- Prefer not to answer

[If 4M0A09 == "No", else skip to 4M0A11]

4M0A11. Why did you not use the provided instructions?

- Too complex, didn't understand
- Cannot read
- Remembered steps from peer educator

- Called the study hotline
- Took test with peer educator
- Took test with a friend
- Other: _____
- Prefer not to answer

4M0A12. I don't want to know the result, but were you able to understand the result of the HIV self-test?

- Yes
- No
- Prefer not to answer

4M0A13. Did you ask anyone for help with the use of the HIV self-test or interpretation of the results?

- Yes
- No
- Prefer not to answer

[If 4M0A13=="Yes"; else skip to 4M0A15]

4M0A14. Who did you ask for help interpreting the results? [Check all that apply]

- Peer educator
- Healthcare worker
- HIV counselor
- Fellow sex worker
- Queen Mother
- Non-sex worker friend
- Family member
- Other: _____
- Prefer not to answer

4M0A15. Do you believe the results of this new HIV test that is not blood based, but instead relies on an oral swab?

- Definitely
- Probably
- Maybe
- Probably not
- Definitely not
- Prefer not to answer

4M0A16. Did you tell anyone the result of your test?

- Yes
- No
- Prefer not to answer

[If 4M0A16=="Yes"; otherwise skip to 4M0A18]

4M0A17. Who did you tell about the results of your test? [Check all that apply]

- Healthcare worker

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- HIV counselor
- Fellow sex worker
- Queen Mother
- Non-sex worker friend
- Family member
- Other: _____

4M0A18. How interested are you in using an HIV self-test again in the future?

- Very interested
- Interested
- Unsure
- Uninterested
- Very uninterested

4M0A19. Would you be willing to pay for an HIV self-test if it were available to you?

- Yes
- No
- I don't know/unsure

[If 4M0A19=="Yes"]:

[If study = "ZEST"]

4M0A20. How much would you be willing to pay for an oral HIV self-test?

- <5 Kwacha
- 5-10 Kwacha
- 11-20 Kwacha
- 21-50 Kwacha
- More than 50 Kwacha
- Prefer not to answer

[If study = "HSPOT"]

4M0A20. How much would you be willing to pay for an oral HIV self-test?

- <1000 UGX
- 1000-5000 UGX
- 5000-10000 UGX
- 10000-50000 UGX
- More than 50000 UGX
- Prefer not to answer

4M0A21. Since the beginning of your participation in the study, how many HIVST kits have been given to you by your peer educator?

- Number: _____
- Prefer not to answer

4M0A22. Of these [4M0A21#] HIVST kits, how many have you used?

- Number: _____
- Prefer not to answer

[FIXED DISTRIBUTION ARM QUESTIONS]

4M0A24. Did your peer educator offer you an HIV self-test coupon?

- Yes
- No
- Prefer not to answer

[If 4M0A24==No, skip to Section 4]

4M0A25. Did you take the HIV self-test coupon that you were offered by your peer educator?

- Yes
- No
- Prefer not to answer

4M0A26. Did you collect the HIV self-test from a distribution point?

- Yes
- No
- Prefer not to answer

[If 4M0A26=="No", ask 4M0A27 & 4M0A28 then skip to Section 4]

4M0A27. Why did you not collect the HIV self-test from the distribution point?

- Didn't know where to go
- Never received coupon
- Lost coupon
- They had no test kits
- Other: _____

[If study = "ZEST", else skip to 4M0A29]

4M0A28. What type of facility did you collect the HIV self-test kit from?

- Drug store/pharmacist
- Health center
- Prefer not to answer

[If study == "HSPOT"]

4M0A29. What was the name of the facility where you went to collect the test? *List recommended study clinics in study area below*

- Clinic A
- Clinic B
- Clinic C
- Don't know
- Prefer not to answer

4M0A30. Why did you select this facility for HIV self-test kit collection?

- Convenience
- Privacy
- Recommendation of peer/other
- Other _____
- Prefer not to answer

4M0A31. Did the facility have an HIV self-test kit in stock that they were able to give to you?

- Yes
- No
- Prefer not to answer

[If study = "ZEST" & 4M0A21="Drug store/pharmacist", skip to 4M0A32]

4M0A30. Did you seek any other health services when you went to the health center to pick up your HIV self-test kit?

- Yes
- No
- Prefer not to answer

[If 4M0A30=="Yes", else skip to 4M0A32]

4M0A31. What other health services did you seek while at the health center? *Check all that apply.*

- HIV testing
- Family planning
- STD testing
- ART
- Other: _____
- Prefer not to answer

4M0A32. I don't want to know the results, but did you use the HIV self-test that you collected?

- Yes
- No
- Prefer not to answer

[Skip to 4M0A04 – 4M0A06 if response to 4M0A23==No]

[Skip to 4M0A07 – 4M0A18 if response to 4M0A23==Yes]

4M0A33. Since the beginning of your participation in the study, how many HIVST kit coupons have been given to you by your peer educator?

- Number: _____
- Prefer not to answer

4M0A34 Of these [4M0A33 #] HIVST coupons, how many kits have you collected?

- Number: _____
- Prefer not to answer

4M2A35 Of these [4M0A34 #] HIVST kits collected, how many kits have you used?

- Number: _____
- Prefer not to answer

Section 4: HIV , HIV testing

In the first section, I would like to ask you some questions related to your recent experiences with HIV testing.

aa. Recent HIV testing

4M4AA01. When was your last HIV test?

- In the last month
- 2 to 3 months ago
- 3 to 6 months ago
- 6 to 12 months ago
- More than a year ago
- I have never had an HIV test
- Prefer not to answer

[If 4M4AA01=="I have never had an HIV test", skip to 1M Section 5B]

4M4AA02. Where was the test done?

- Public sector
- Private medical sector
- Home
- Workplace
- Self-test
- Other
- Prefer not to answer

[If 4M4AA02=="Self-test", skip to 4M4AA04]

[If 4M4AA02=="Public sector" or "Private medical sector", else skip to 4M4AA06]

4M4AA03. What was the name of the clinic where you got the test? *List recommended study clinics below*

- Clinic A
- Clinic B
- Clinic C
- Other: _____
- Don't know
- Prefer not to answer

4M4AA04. When you went to test for HIV, did you bring the referral card provided to you by the study?

- Yes

- No
- Prefer not to answer _____

[If 4M4AA04=="No", else skip to 4M4AA06]

4M4AA05. Why did you not bring the referral card provided to you by the study? *Check all that apply*

- What card?
- Lost card
- Forgot card
- Never received card
- Other: _____
- Prefer not to answer

4M4AA06. When you went to test for HIV, did you disclose that you are a sex worker?

- Yes
- No
- Prefer not to answer _____

4M4AA07. Did you get the result of your HIV test?

- Yes
- No
- Unsure
- Prefer not to answer

4M1A08. What was the result of your last HIV test?

- Positive
- Negative
- Unsure
- Inconclusive
- Prefer not to answer

[If 4M4AA08=="Negative" or "Unsure", skip to Section 5B]

[If 4M4AA02=="Self-test", ask 4M4AA09; else skip to 4M4AA12]

4M4AA09. Following your positive HIV self-test result, did you get a confirmatory test?

- Yes
- No
- Unsure
- Prefer not to answer

4M4AA10. When did you first learn you had HIV infection?

- Within the past month
- Within the past 3 months
- Between 3 and 6 months ago
- Between 1 and 2 years ago
- More than 2 years ago

- Unsure
- Prefer not to answer

4M4AA11. After your last positive test, did you seek medical care for your HIV?

- Yes
- No
- Prefer not to answer

[If 4M4AA11=="Yes", ask 4M4AA12; else skip to 4M4AA14]

4M4AA12. Where did you seek care for HIV?

- Public hospital
- Private clinic
- Community center
- Faith-based hospital
- Traditional healer
- Other: _____
- Prefer not to answer

4M4AA13. Why did you not seek medical care for HIV? (*ask participant to describe reasons and check appropriate boxes or write in response if not on the list*)

- No time to go to clinic
- Feel unwelcomed at clinics
- Have an alternative way to treat HIV
- Still planning to seek medical care
- I do not feel sick
- I do not need care
- Prefer not to answer

4M4AA14. Are you currently receiving medical care for your HIV?

- Yes
- No
- Prefer not to answer

4M4AA15. Are you currently taking antiretroviral medicine (ARVs) for your HIV?

- Yes
- No
- Prefer not to answer

4M4AA16. Are you currently taking traditional medicines for your HIV?

- Yes
- No
- Prefer not to answer

a. HIV priors/risk perception

For these next questions I want to know how likely you think it is that an event will happen. We are going to use a ladder again to represent how likely you think each event is. The bottom rung of the ladder represents something that is very unlikely to happen (for example: the chance a lion rides a bicycle through Kampala). The top rung of the ladder represents something that will happen with certainty (for example: the chance the sun is going to set this evening). The middle stop represents something that is equally likely to happen and not happen (like flipping a coin). Do you have any questions about the ladder?

[Testing ladder understanding] Where would you put on the ladder the chance it will snow in Kampala tomorrow? *Verify she puts this on the bottom rung of the ladder – if not, re-explain.*



4M4A01. How likely is it that you currently have HIV?

- Ladder step: _____
- Prefer not to answer

4M4A02. How likely is it that you will contract HIV in the next year?

- Ladder step: _____
- Prefer not to answer

4M4A03. If a HIV negative woman has vaginal sex once with an HIV positive man and they do not use a condom, how likely is that woman to contract HIV?

- Ladder step: _____
- Prefer not to answer

4M4A04. What are ways you can reduce your risk of contracting HIV? *Don't read answers, ask participant to list ways, check all that apply*

- Use condoms
- Select HIV negative partners
- Reduce number of partners
- Other: _____
- Prefer not to answer

4M4A05. How likely are you take actions that reduce your risk of contracting HIV?

- Very likely
- Somewhat likely
- Unlikely
- Very unlikely
- Prefer not to answer

4M4A06. For every 10 female sex workers in Kampala, how many of them do you think are currently living with HIV?

- Number: _____
- Prefer not to answer

4M4A07. For every 10 clients of female sex workers in Kampala, how many of them do you think are currently living with HIV?

- Number: _____
- Prefer not to answer

b. HIV knowledge (HIV-KQ-18)

I am going read you a number of statements that test your HIV knowledge. After I read each statement, please indicate if you think the statement is “True” or “False.”

<i>Question</i>	<i>True</i>	<i>False</i>	<i>Don't know/not sure</i>	<i>Prefer not to answer</i>
4M4B01. Coughing and sneezing DO NOT spread HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4M4B02. A person can get HIV by sharing a glass of water with someone who has HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4M4B03. Pulling out the penis before a man climaxes/cums keeps a women from getting HIV during sex.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4M4B04. A women can get HIV if she has anal sex with a man.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4M4B05. Showering, or washing one's genitals/private parts, after sex keeps a person from getting HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4M4B06. All pregnant women infected with HIV will have babies born with AIDS.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4M4B07. People are likely to get HIV by deep kissing, putting their tongue in their partner's mouth, if their partner has HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

4M4B08. Having sex with more than one partner can increase a person's chance of being infected with HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4M4B09. A person can get HIV from oral sex.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

c. HIV knowledge status

For these next few questions, I want you to think about your behavior over the last month.

4M4C01. In the last month, how often did you ask a client to share their HIV status with you before engaging in sex?

- Never
- Seldom
- Sometimes
- Often
- Always
- Prefer not to answer

4M4C02. In the last month, how often did you share your HIV status with a client you before engaging in sex?

- Never
- Seldom
- Sometimes
- Often
- Always
- Don't know status
- Prefer not to answer

4M4C03. Thinking about the last client you had vaginal sex with, did knowledge of your partner's HIV status factor into your decision to use a condom?

- Yes
- No
- Don't know client's HIV status
- Prefer not to answer

4M4C04. Thinking about the last client you had vaginal sex with, did knowledge of your own or HIV status factor into your decision to use a condom?

- Yes
- No
- Prefer not to answer

Section 5B: Physical and Behavioral Health, Access to Healthcare

4M5B01. When you need healthcare, where do you go to seek care? (*check all that apply*)

- Community clinic
- Government hospital

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- Faith-based hospital
- Private doctor's office
- Traditional healer
- Other _____

4M5B01A. Since we last talked to you, have you had a medical exam with a healthcare provider for purposes other than HIV testing (including doctor, nurse, or other healthcare provider)?

- Yes
- No
- I don't know
- Prefer not to answer

[If 4M5B01A=="Yes", else skip to 4M1B02]

4M5B01B. Why did you seek medical care? *Check all that apply*

- Family planning
- Pregnancy
- Violence
- Sickness
- Other: _____
- Prefer not to answer

4M5B02. Since we last talked to you, has there been a time when you needed healthcare but were unable to access it?

- Yes
- No
- I don't know
- Prefer not to answer

4M5B03. What, if anything, has made it difficult for you to get the healthcare you need?

- I don't have transportation
- I don't know where to get services
- I don't have money for services
- Scheduled times that services are available are not good for my schedule
- I don't have time
- I don't feel comfortable going
- I have not had difficulty getting the care I need
- Other: _____

Please indicate whether you agree or disagree with the following statements:

4M5B04. I feel comfortable speaking with my medical care provider about working in sex work

- Agree
- Disagree
- Prefer not to answer

4M5B05. I worry that my medical care provider makes judgments about me for working in sex work

- Agree
- Disagree
- Prefer not to answer

Section 2: Professional Information, including Sexual Behavior with Clients

In this section, I am going to ask you some questions about your work and your sexual behaviors with paying partners.

b. Sexual behaviors with clients/while working

4M2B02. In the last month, how often have condoms been available to you when you are working?

- Never
- Seldom
- Sometimes
- Often
- Always
- Prefer not to answer

4M2B13. On an average night, how many sexual clients do you think other sex workers in [Kapiri/Chirundu/Livingstone/Kampala] each have, on average?

- _____ clients
- Prefer not to answer

4M2B14. On an average night when you are working, how many sexual clients do you have?

- _____ clients
- Prefer not to answer

4M2B15. Of there [4M2B14] clients, on an average night, with how many sexual clients do you use a condom?

- _____ clients
- Prefer not to answer

Section 3: Non-Commercial Sexual Behavior and Reproductive Health

In this section, I am going to ask you some questions about sexual behaviors with non-paying partners.

c. Primary partnership

4M3C01. Do you have a primary or main sexual partner who is not a client (e.g. a husband or boyfriend)?

- Yes
- No
- Prefer not to answer

4M3C02. [If yes to 4M3C01] In the last month, how often do you use a condom with this partner for vaginal or anal sex?

- Never
- Seldom
- Sometimes
- Often
- Always
- Prefer not to answer

4M3C04. Thinking about the last month, how many sexual partners did you have that are not clients?

- _____ partners
- Prefer not to answer

4M3C05. Of these [4M3C04] partners, how many did you ever use condoms with in the last month?

- _____ partners
- Prefer not to answer

d. Impact of study on sexual relations

4M3D01. Have you changed your selection of sexual partners (both clients and casual) as a result of your interactions with your peer educator?

- Yes
- No
- Prefer not to answer

4M3D02. Have you changed your use of condoms as a result of your interactions with your peer educator?

- Yes
- No
- Prefer not to answer

[If arm = “Fixed Distribution” or “Direct Distribution”, else skip to 1M Section 5A]

[If 4M0A02==“Yes” | 4M0A26==“Yes”]

4M3D03. Have you changed your selection of sexual partners (both clients and casual) as a result of your oral HIV self-test result?

- Yes
- No
- Prefer not to answer

4M3D04. Have you changed your use of condoms as a result of your oral HIV self-test result?

- Yes
- No
- Prefer not to answer

[If 4M8A03 = “Yes”, else skip to 4M Section 5A]

4M3D05. Have you told any of your clients the result of your oral HIV self-test?

- Yes
- No
- Prefer not to answer

4M3D06. Have you told any of your non-client sexual partners the result of your oral HIV self-test?

- Yes
- No
- Prefer not to answer

Section 5A: Physical and Behavioral Health, Access to Healthcare

a. Intimate partner violence

Now I am going to ask you some questions about violence and abuse.

4M5A07. In the past month, has a sexual partner ever hit slapped, punched, pushed, shoved or don't anything else to physically hurt you as a result of participating in this study?

- Yes
- No
- Prefer not to answer

4M5A09. In the past month, has a sexual partner ever physically forced you to have sex when you did not want to?

- Yes
- No
- Prefer not to answer

4M5A11. In the past 12 months, have you had sex when you did not want to, because you were afraid of what your partner would do if you refused?

- Yes
- No
- Prefer not to answer

4M5A13. In the past month, has a sexual partner ever verbally or emotionally abused you as a result of participating in this study?

- Yes
- No
- Prefer not to answer

[If arm = "Fixed Distribution" or "Direct Distribution", else skip to 4M Section 6]

[If Yes to 4M5A07, 4M5A09, 4M5A11, or 4M5A13, loop through for each "yes" answer]:

4M5A14. Was this related to your use of an oral HIV self-test?

- Yes
- No
- Prefer not to answer

Section 6: Psychosocial Health

In this section I would like to ask you questions about your beliefs and feelings.

a. Fatalism

Now I am going to read you a number of statements about yourself. After each statement I want you to tell me whether you “strongly disagree”, “disagree”, “agree” or “strongly agree.”

<i>Question</i>	<i>Strong disagree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Strongly agree</i>	<i>Prefer not to answer</i>
<i>Predetermination</i>					
4M6A01. “If someone is meant to get HIV, it doesn’t matter what precautions they take, they will get HIV anyways”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6A02. “How long I live is predetermined”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<i>Luck</i>					
4M6A03. “I will get HIV if I am unlucky”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6A04. “My health is a matter of luck”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<i>Pessimism</i>					
4M6A05. “Everything that goes wrong for me does”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6A06. “There is really no way I can solve some the problems I have”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

(Select questions, modified for HIV, from: Shen L, Condit C, Wright L. The Psychometric Property and Validation of a Fatalism Scale. *Psychol Health* 2009 June; 24(5): 597-613)

b. Personal preferences

4M6B01. [AVOIDANCE] When I feel scared or worried about something I try to avoid it. (SOURCE: Whiteside, 2013)

- Strongly disagree
- Disagree
- Agree
- Strongly agree

- Prefer not to answer

4M6B02. **[TRUST]** “I assume that people have only the best intentions.”

- Strongly disagree
- Disagree
- Agree
- Strongly agree
- Prefer not to answer

4M6B03. **[POSITIVE RECIPROCITY]** When someone does me a favor I am willing to return it.

- Strongly disagree
- Disagree
- Agree
- Strongly agree
- Prefer not to answer

4M6B04. **[NEGATIVE RECIPROCITY]** If I am treated unjustly, I will take revenge at the first occasion, even if there is a cost to do so.

- Strongly disagree
- Disagree
- Agree
- Strongly agree
- Prefer not to answer

The next set of statements are going to ask about your willingness to do different things. After each statement I want you to tell me whether you are “strongly unwilling”, “somewhat unwilling”, “somewhat willing” or “strongly agree.”

4M6B05. **[NEGATIVE RECIPROCITY]** How willing are you to punish someone who treats you unfairly, even if there may be costs for you?

- Very unwilling
- Somewhat unwilling
- Somewhat willing
- Very willing
- Prefer not to answer

4M6B06. **[NEGATIVE RECIPROCITY]** How willing are you to punish someone who treats others unfairly, even if there may be costs for you?

- Very unwilling
- Somewhat unwilling
- Somewhat willing
- Very willing
- Prefer not to answer

4M6B07. **[RISK TAKING]** Please tell me, in general, how willing or unwilling you are to take risks.

- Very unwilling
- Somewhat unwilling
- Somewhat willing

- Very willing
- Prefer not to answer

4M6B08. **[TIME DISCOUNTING]** How willing are you to give up something that is beneficial for you today in order to benefit more from that in the future?

- Very unwilling
- Somewhat unwilling
- Somewhat willing
- Very willing
- Prefer not to answer

4M6B09. **[ALTRUISM]** How willing are you to give to good causes without expecting anything in return?

- Very unwilling
- Somewhat unwilling
- Somewhat willing
- Very willing
- Prefer not to answer

(Modified the streamline module from: Armin Falk, Anke Becker, Thomas Dohmen, David Huffman, and Uwe Sunde (2016), The Preference Survey Module: A Validated Instrument for Measuring Risk, Time, and Social Preferences, IZA Discussion Paper No. 9674)

c. General Self-Efficacy Scale (GSE)

Now I am going to read you a number of statements about yourself. After each statement I want you to tell me if you think the statement is “false”, “somewhat false”, “somewhat true”, or “true.”

<i>Question</i>	<i>False</i>	<i>Somewhat false</i>	<i>Somewhat true</i>	<i>True</i>	<i>Prefer not to answer</i>
4M6C01. “I can always manage to solve difficult problems if I try hard enough.”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6C02. “If someone opposes me, I can find the means and ways to get what I want.”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6C03. “It is easy for me to stick to my aims and accomplish my goals.”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6C04. “I am confident that I could deal efficiently with unexpected events.”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6C05. “Thanks to my resourcefulness, I know how to handle unforeseen situations.”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6C06. “I can solve most problems if I invest the necessary effort.”	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

4M6C07. "I can remain calm when facing difficulties because I can rely on my coping abilities"	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6C08. "When I am confronted with a problem, I can usually find several solutions."	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
1M6C09. "If I am in trouble, I can usually think of a solution."	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
1M6C10. "I can usually handle whatever comes my way."	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

(Source: Schwarzer R, Jerusalem M (1995). Generalized Self-Efficacy scale. In J. Weinman, S. Wright, & M. Johnston, *Measures in health psychology: A user's portfolio. Causal and control beliefs* (pp. 35-37). Windsor, UK: NFER-NELSON).

d. Empowerment [Beattie et al, AJPH]

Now I would like to ask you some questions about how you feel about yourself and about other people.

4M6D01. "I feel a strong sense of unity with sex workers I work with"

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Prefer not to answer

4M6D02. "I feel a strong sense of unity with sex workers I do not know"

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Prefer not to answer

4M6D03. "In the past 12 months, I have stood up to someone to help a fellow sex worker"

- Yes
- No
- Not sure
- Prefer not to answer

4M6D04. In the past year, have you attended any public events where you could be identified as a sex worker?

- Yes
- No

- Not sure
- Prefer not to answer

4M6D05. In the past month, was there a time when you wanted to use a condom during sexual intercourse with a client but did not use it?

- Yes
- No
- Not sure
- Prefer not to answer

e. Depression (PHQ-9)

Now I am going to ask you about your feelings. I am going to read you a list of problems and after each problem I want you to tell me how often you have felt this way over the past two weeks. Your options for response are “not at all”, “several days”, “more than half the days,” or “nearly every day.”

Over the last two weeks, how often have you...

<i>Question</i>	<i>Not at all</i>	<i>Several days</i>	<i>More than half the days</i>	<i>Nearly every day</i>	<i>Prefer not to answer</i>
4M6E01. Had little interest or pleasure in doing things?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E02. Felt down, depressed, or hopeless?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E03. Had trouble falling or staying asleep, or sleeping too much?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E04. Felt tired or having little energy?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E05. Had a poor appetite or overeating?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E06. Felt bad about yourself - or that you are a failure or have let yourself or your family down?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E07. Had trouble concentrating on things, such as reading the newspaper or watching television?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E08. Moved or spoke so slowly that other people could have noticed? Or the opposite, being so fidgety or restless that you have been moving around a lot more than usual?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4M6E09. Thought that you would be better off dead, or thought of hurting yourself in some way?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

(SOURCE: Kroenke, Kurt, and Robert L. Spitzer. "The PHQ-9: a new depression diagnostic and severity measure." *Psychiatric annals* 32.9 (2002): 509-515; Validated in Swahili: Smith Fawzi, Mary. Manuscript in preparation.)

f. HIV stigma

Now I am going to ask you some questions about your perceptions of people living with HIV. Please answer whether you “agree” or “disagree” with the following statements.

<i>Question</i>	<i>Agree</i>	<i>Disagree</i>	<i>Prefer not to answer</i>
4M6F01. People who have HIV are dirty.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F02. People who have HIV are cursed.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F03. People who have HIV should be ashamed.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F04. It is safe for people who have HIV to work with children.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F05. People with HIV must expect some restrictions on their freedom.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F06. A person with HIV must have done something wrong and deserves to be punished.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F07. People who have HIV should be isolated.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F08. I do not want to be friends with someone with HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4M6F09. People who have HIV should not be allowed to work.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

(SOURCE: Kalichman, Seth C., et al. "Development of a brief scale to measure AIDS-related stigma in South Africa." *AIDS and Behavior* 9.2 (2005): 135-143.)

Section 8: Utilization of study services

a. Peer educators

4M8A01. Did you meet with your peer educator in the past month?

- Yes
- No
- Prefer not to answer

4M8A02. How many times did you meet with your peer educator?

- _____ times
- Prefer not to answer

4M8A03. Did your peer educator give you condoms when you met with them?

- Yes, every time
- Yes, some of the time
- No
- Prefer not to answer

4M8A04. In the past month, was there a time you contacted your peer educator for support, to answer a question, or for any other reason outside of a scheduled visit?

- Yes
- No
- Not sure
- Prefer not to answer

[If 4M8A04=="Yes", else skip to 4M8A06]:

4M8A05. What did you contact the peer educator for?

- To get condoms
- For help accessing HIV testing
- For help on how to use the HIV self-test kit
- For help interpreting the HIV self-test kit results
- For help with accessing healthcare unrelated to HIV testing
- For help with violence or interaction with clients
- Other: _____
- Prefer not to answer

4M8A06. How would you rate the support you receive from your peer educator?

- Very useful
- Useful
- Somewhat useful
- Not useful at all
- Prefer not to answer

b. Hotline utilization

4M8B01. In the past month, was there a time you contacted the study hotline for support, to answer a question, or for any other reason outside of a scheduled visit?

- Yes
- No
- Not sure
- Prefer not to answer

[If 4M8B01=="Yes", else skip to Section 9]:

4M8B02. What did you call the study hotline for?

- For help accessing HIV testing
- For help on how to use the HIV self-test kit
- For help interpreting the HIV self-test kit results
- For help with accessing healthcare unrelated to HIV testing
- For help with violence or interaction with clients
- Other: _____
- Prefer not to answer

4M8B03. How would you rate the support you receive from the hotline?

- Very useful
- Useful
- Somewhat useful
- Not useful at all
- Prefer not to answer

Section 10: HIV knowledge game

Now I am going to ask you about your current HIV status and confirm your HIV status with an HIV rapid test. If the HIV status you report matches your test results you will receive mobile phone credit equivalent to \$1 USD (UGX 4,000). If you do not want to share your HIV status with me or you do not want to take a HIV rapid test, you can choose not to participate in this assessment.

4M10A01. Do you agree to participate in this assessment?

- Yes
- No

[If 4M10A01=="No", move to Section 11]

4M10A02. Do you currently know your HIV status?

- Yes
- No

4M10A03. What is your current HIV status. If you do not know your current HIV status, please take your best guess.

- Positive
- Negative

4M10A04. Now, I would like to ask you to take an HIV test. As we reviewed in the informed consent, this HIV test is voluntary. May I continue with the HIV test?

- Yes
- No

[If 4M10A04==No, continue to Section 11]

4M10A05. Results of rapid HIV test

- Positive
- Negative

Section 11: WONETHA membership

[Only for individuals in the HSPOT study]

[If study=="HSPOT"]

4M11A01. Have you ever heard of the FSW owned and operated NGO called WONETHA (Women's Network for Human Rights Advocacy)?

- Yes
- No
- Unsure
- Prefer not to answer

WONETHA is an NGO that provides a number of programs for FSWs who become members. These programs are designed to help women like yourself learn about various contraception options, build skills in business, and improve literacy. WONETHA also gives FSWs an opportunity to come together and talk about issues that are important to them. WONETHA membership is UGX 10,000/year; for participating in this study we will cover your first year of membership if you choose to enroll now.

4M11A02. Would you like to become a WONETHA member today? *If yes, give them forms for enrollment*

- Yes
- No
- Unsure
- Prefer not to answer

[If 4M11A01=="No", else skip to 4M Section 12]

4M11A03. Would you be interested in becoming a WONEHA member sometime in the future?

- Yes
- No
- Unsure
- Prefer not to answer

Section 12: Unused HIV Self-Test Kit Buyback

[Only for individuals in the fixed or direct distribution arms]

As part of the research program and because we are at the conclusion of the study, we are collecting unused, unopened HIV self-tests. Please note that this is *only* as part of the research, and in the future neither this research group nor other groups will be collecting unused HIV self-test kits if you do not need them anymore. We are willing to offer you 10 Kwacha or 4,000 UGX per unused, unopened HIV self-test kit. Do you have any test kits you would like to give me?

4M12A01. Number of test kits collected: _____